

# STATE OF WISCONSIN Division of Hearings and Appeals

In the Matter of



**DECISION** 

MPA/172028

## PRELIMINARY RECITALS

Pursuant to a petition filed February 12, 2016, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Division of Health Care Access and Accountability in regard to Medical Assistance, a telephone hearing was held on March 14, 2016.

The issue for determination is whether the respondent correctly denied petitioner's prior authorization request for a coronectomy.

There appeared at that time the following persons:

#### PARTIES IN INTEREST:

Petitioner:



## Respondent:

Department of Health Services 1 West Wilson Street, Room 651 Madison, Wisconsin 53703

By: DDS (written appearance only)
Division of Health Care Access and Accountability

1 West Wilson Street, Room 272

P.O. Box 309

Madison, WI 53707-0309

#### ADMINISTRATIVE LAW JUDGE:

Peter McCombs

Division of Hearings and Appeals

## **FINDINGS OF FACT**

- 1. Petitioner (CARES # ) is a resident of Lincoln County.
- 2. Petitioner underwent a coronectomy on January 11, 2016, to treat a decaying tooth. The tooth could not be extracted due to the high likelihood of nerve damage.

3. On January 22, 2016, of of requested prior authorization for a coronectomy, PA no. By a letter dated February 3, 2016, the respondent denied the request because such procedure is not covered by MA.

#### **DISCUSSION**

The respondent asserts, correctly, that the requested PA procedure is not a covered service. The Medicaid Reimbursement Fee Schedule does not identify coronectomy as a covered procedure, nor is it listed in the Wisconsin Administrative Code. See, Wis. Admin. Code §DHS 107.03.

The petitioner argued that the procedure was medically necessary and his only option. The coronectomy was performed due to concerns regarding facial paralysis/nerve damage. He testified that his provider was instructed to file a PA request for special consideration, which it did. The PA request specifically stated, "[Petitioner] wishes to proceed with coronectomy and is aware that this may likely be a non covered service by his insurance. ..." Exhibit 2.

Since the Department does not cover the requested procedure, I must conclude that the denial was correct. It is the long-standing policy of the Division of Hearings & Appeals, Work & Family Services Unit, that the Department's assigned administrative law judges do not possess equitable powers. See, Wisconsin Socialist Workers 1976 Campaign Committee v.McCann, 433 F.Supp. 540, 545 (E.D. Wis.1977). This office must limit its review to the law as set forth in statutes, federal regulations, and administrative code provisions. Under law, he is not eligible for reimbursement for the coronectomy; no exception applies, and I am without any equitable powers to direct any remedy beyond the remedies available under law.

#### **CONCLUSIONS OF LAW**

The DHCAA correctly denied the requested coronectomy reimbursment because it is a non-covered service of the MA program.

#### THEREFORE, it is

#### **ORDERED**

That the petition for review herein be and the same is hereby dismissed.

### REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received** within 20 days after the date of this decision. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

#### APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, Madison, Wisconsin 53703, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison, Wisconsin, this 29th day of April, 2016

\sPeter McCombs
Administrative Law Judge

Division of Hearings and Appeals



## State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

Brian Hayes, Administrator Suite 201 5005 University Avenue Madison, WI 53705-5400 Telephone: (608) 266-3096 FAX: (608) 264-9885 email: DHAmail@wisconsin.gov Internet: http://dha.state.wi.us

The preceding decision was sent to the following parties on April 29, 2016.

Division of Health Care Access and Accountability